

To: Dental Providers

Beginning 1/1/07, the following CDT-4 changes will be effective. Please remember that not all CDT-4 codes are covered by Alabama Medicaid. The current fee schedule can be obtained from our website at www.medicaid.alabama.gov or by calling the Provider Assistance Center (PAC) at 1-800-688-7989. The fee schedule is for informational purposes only. Please bill your usual and customary (UCR) fee. The changes below will be reflected in the March Provider Manual update. Note the date of the revision at the bottom of each page of Chapter 13. If you have any questions, you can call the Provider Assistance Center (PAC) at 1-800-688-7989 or the Dental Program at (334) 242-5472.

EXISTING CODE DELETED	REPLACED BY EXISTING CODE	COMMENTS
D1201	D1120/D1203	It is now acceptable to bill individual codes instead of the combination code that is being deleted.
D1205	D1110/D1204	It is now acceptable to bill individual codes instead of the combination code that is being deleted.

NEW CODES	DESCRIPTION	RATE
D0145	Oral Evaluation for a patient under three years of age and counseling with primary caregiver.	\$18.00
D9612*	Therapeutic parenteral drugs, two or more administrations, different medications	\$9.00
D1206	Topical fluoride varnish; therapeutic application for moderate to high risk caries	\$15.00

^{*}requires prior authorization

DESCRIPTION CHANGES	OLD	NEW
D0120	Periodic Oral Evaluation	Periodic Oral Evaluation – established patient
D2952	Cast Post and Core in addition to crown	Post and core in addition to crown, indirectly fabricated
D2953	Each additional cast post – same tooth	Each additional indirectly fabricated post – same tooth
D9610	Therapeutic drug injection, by report	Therapeutic parental drug, single administration